Arizona Department of Education
Health and Nutrition Services
Summer Food Service Program (SFSP)
Documentation of Training to Program Personnel   **MUST SUBMIT TO ADE IF ADVANCE IS REQUESTED**

Name and Address of Sponsor	Date of Training
Name of Trainer(s)	Location of Training

Training Topics:

☐ Purpose of the Program	☐ Record Keeping
☐ Meal Pattern Requirements	☐ Duties of a Monitor
☐ Site Eligibility	☐ Civil Rights
☐ Site Operations	☐ Other

Attach additional pages if necessary. Attach copy of program outline.

Training Participant (print name)	Participant's Sigature	Title	Name of Participant's Site